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Testimony of Shelly Nolan, Sexual Assault Crisis Counselor Hartford Sexual Assault Crisis Services Submitted to the Public Health Committee March 3, 2008

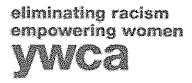
SB 243 AN ACT REQUIRING ACUTE CARE HOSPITALS TO MAKE FORENSIC NURSING SERVICES AVAILABLE TO PATIENTS.

Senator Handley, Representative Sayers, and members of the Public Health Committee, my name is Shelly Nolan. I am a state certified Sexual Assault Crisis Counselor/ Advocate for the Hartford Sexual Assault Crisis Service, a program of the YWCA New Britain. I am writing with a request to amend the concepts raised in SB 243 AN ACT REQUIRING ACUTE CARE HOSPITALS TO MAKE FORENSIC NURSING SERVICES AVAILABLE TO PATIENTS to include the creation of a state funded SANE/SAFE rapid response program.

The YWCA New Britain provides services to all towns in Hartford County plus Plymouth and part of Tolland County, including responding directly to 14 hospitals throughout the state. During the past 2007-2008 fiscal year, I have personally accompanied 9 survivors of sexual assault, and their families, to various hospitals throughout the region. While each case was different, I would like to share two specific cases to highlight the impact that a SANE can make following a sexual assault.

In one instance, I accompanied a young woman to a local hospital at 5 a.m. She was assaulted by an acquaintance in her home and had been confused throughout the night about seeking medical services and police involvement. Following a call to the state hotline, she determined that her best choice was to go to the hospital and have an evidence collection kit completed. Upon arrival to the Emergency Room, she went into a safe room where a SANE nurse arrived to greet her. Along with my assistance, the nurse and I explained in detail the steps of the collection kit as well as what could be expected. After learning that her clothing would be taken, we were able to make arrangements to have a friend bring some of her own clothes to leave the hospital in. After the kit and exam were complete, she was exhausted but relieved and felt that she could continue forward in the process and make a statement to the police. The total time she spent in the hospital that morning was less than three hours.

On another occasion, I accompanied a woman to a different local hospital. In this scenario, the hospital did not have access to a SANE nurse and the young woman was taken to a room to wait for someone to be available. After waiting for several hours, she stated that she could wait no longer and needed to leave to change and take a shower. We fully discussed how leaving could affect her case and she elected to wait. After advocating on her behalf, a male doctor arrived to perform the kit. Since he had never completed one before, I walked him through the steps of the kit and provided information to prevent contamination of the evidence. In this capacity, I was unable to offer consistent support and comfort to the survivor and instead spent the majority of my time acting in a capacity outside of my role. In total, the process took over eight hours to complete. Clearly, this example illustrates how important it is to have a trained professional available to complete the evidence collection kit in a timely manner and with the compassion the survivor deserved.



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All survivors of sexual assault deserve the same consistent access to specially trained medical personnel following the horror of a sexual assault. After someone has been assaulted, they should not have to worry that when they seek medical services they will not receive the best standard of care. Implementation of a statewide 24-hour program would ensure access for all individuals to obtaining effective, collaborative, and prompt care. In addition, it would provide adequate funding for nurses who have a passion for working with this specific population to continue to act as resources for persons in need.

In an ideal world, the need for this discussion would not exist. However, in our society we must deal with the horrors of sexual violence on a daily basis. Within our power, we cannot control individuals who choose to perpetrate such acts of violence against others; however, we can control the type of care that survivors receive when they turn to hospitals for help.

Thank you for your consideration.